Arizona Department of Health Services Office for Children with Special Health Care Needs

FAMILY RESOURCE COORDINATION PROCESS FLOW CHART

CSHCN Family Resource Coordination	Traumatic Brain Injury Family Resource Coordination	Spinal Cord Injury Family Resource Coordination
Qualifications:	Qualifications:	Qualifications:
Children birth to 21 years of age, who present with a broad range of disabilities or chronic illnesses diagnosed at any time during childhood, including the prenatal period, may qualify for this program component. Such chronic conditions may necessitate adaptations for daily functioning, and support to the family. Children with special health care needs may require: Prolonged or periodic inpatient or outpatient hospitalizations that are longer than the average stay or with greater frequency than the general population Adaptations for daily living due to health related functional limitations A special level of expertise for treatment and/or services from multiple disciplines Special services in educational settings	Children who are survivors of traumatic brain injury, sustained prior to the age of 18 may qualify for Family Resource Coordination coordination. Young adults who qualify may continue to receive services, as needed, until age 21. Traumatic Brain Injury is based upon self/caregiver report and medical documentation of a traumatically induced physiological disruption of brain function as a result of: > The head being struck > The head striking an object > The brain undergoing an acceleration/deceleration movement without direct trauma to the head > Hypoxia/anoxia related disruptions in brain function because of a traumatic event Head injury does not include vascular accidents, aneurysms, and congenital defects. Excluded are disruptions in brain function caused by stroke, tumor, encephalitis, etc.	Children who are survivors of a spinal cord injury sustained prior to the age of 18 may qualify for Family Resource Coordination. Young adults who qualify may continue to receive services, as needed, until age 21. Spinal Cord Injury is based upon self/caregiver report and medical documentation of a severance or severe injury to the spinal cord caused by trauma which may result in partial or total paralysis of the arms or legs or both and which may also impair vital functions and motor functions defined as: Acute traumatic injury of the spinal cord and nerve roots Motor and sensory deficits

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Referral Process:	Referral Process:	Referral Process:
Primary referral sources include, but are not limited to: self-referrals (parent/caregiver), hospitals, Trauma Centers, rehabilitation centers, Physicians, local schools, Public Health Agencies, social service organizations, emergency medical staff, and community health nurses (CHN), other health care providers and community organizations. Contacting the Family Resource Coordinator within the families corresponding county of residence or the Office for Children with Special Health Care Needs Family Resource Coordination Program Manager at 602-542-1860 or 1-800-232-1676.	Primary referral sources include, but are not limited to: self-referrals (parent/caregiver), hospitals, Trauma Centers, rehabilitation centers, Physicians, local schools, Public Health Agencies, social service organizations, emergency medical staff, and community health nurses (CHN), other health care providers and community organizations. Contacting the Family Resource Coordinator within the families corresponding county of residence or the Office for Children with Special Health Care Needs Family Resource Coordination Program Manager at 602-542-1860 or 1-800-232-1676.	Primary referral sources include, but are not limited to: self-referrals (parent/caregiver), hospitals, Trauma Centers, rehabilitation centers, Physicians, local schools, Public Health Agencies, social service organizations, emergency medical staff, and community health nurses (CHN), other health care providers and community organizations. Contacting the Family Resource Coordinator within the families corresponding county of residence or the Office for Children with Special Health Care Needs Family Resource Coordination Program Manager at 602-542-1860 or 1-800-232-1676.
www.azdhs.gov/phs/ocshcn	www.azdhs.gov/phs/ocshcn	www.azdhs.gov/phs/ocshcn

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Services:		

Provide Resource Coordination and link families to:

Hospitals, physicians, CRS clinics, health plans and/or other providers

Nutritional resources provided by WIC, AHCCCS, ALTCS, and other sources

Child and family intervention/education such as assistance and advocacy with intervention activities

Support and technical assistance in researching and accessing services from multiple systems

Community health nurse visitation

Public/private insurance

Assistive technology devices and services

ADHS/OCSHCN/TBI/SCI serves as the payer of last resort and therefore all other resources and avenues of reimbursement must be pursued prior to coverage by ADHS/OCSHCN/TBI/SCI.

Transportation to medical services and related costs

Cognitive training

Prescription medications

Translation services

Speech-language Communication

Occupational therapy

Aquatic Therapy

Vision services

Nursing services

Nutritional services

Neuropsychological evaluation or rehabilitation

Family support services

Medical services for diagnostic or evaluation purposes only

Physician co-pays
Equestrian Therapy
Madical supplies

Medical supplies Social work services

Psychological services

Physical therapy Attendant care

Dental services related to the special health care need

Household expenses (utilities, rent)

Music therapy Health Services

CSHCN Family Resource Coordination	Traumatic Brain Injury Family Resource Coordination	Spinal Cord Injury Family Resource Coordination
Financial Assistance/ Family Liability:	Financial Assistance/ Family Liability:	Financial Assistance/ Family Liability:
Family Resource coordination and the development of the Service Plan are free of charge to families.	Family Resource coordination and the development of the Service Plan are free of charge to families.	Family Resource coordination and the development of the Service Plan are free of charge to families.
All avenues for reimbursement for services shall be pursued before Direct Care Services funds are used. Acknowledgement of this process must be documented in the childøs file.	All avenues for reimbursement for services shall be pursued before Direct Care Services funds are used. Acknowledgement of this process must be documented in the childøs file.	All avenues for reimbursement for services shall be pursued before Direct Care Services funds are used. Acknowledgement of this process must be documented in the childøs file.
Families may receive financial assistance for services identified on the Service Plan that are not covered by insurance or other resources.	Families may receive financial assistance for services identified on the Service Plan that are not covered by insurance or other resources.	Families may receive financial assistance for services identified on the Service Plan that are not covered by insurance or other resources.